	Board Use Only
	Received:
ARKANSAS BOARD OF REGISTRATION	Check:
FOR PROFESSIONAL ENGINEERS AND LAND SURVEY P.O. Box 3750	ORS
Little Rock, Arkansas 72203-3750 Telephone: (501) 682-2824 Fax: (501) 682-28 623 Woodlane Ave Little Rock, AR 72201-1009 www.arkansas.gov/pels	827 COA No:
CERTIFICATE OF AUTHORIZATION APPLICATION FORM	ON
APPLICATION FORM	
	Origination Fee \$150.00 Renewal Fee \$50.00 Amended Application No fee due. Reinstatements please call the Board for the fee.
This (indicate whether original, ame made, by the undersigned for authorization to offer Engineering a:	and/or Surveying Services in the State of Arkansas as
□ Corporation □ Firm □ Partnership □ LLC	 Professional Association
Name of business:	
Address of principal place of business: Phone: () -	Fax: () - E-mail:
Name and registration number of the Arkansas PE and or PS in c	charge of each Arkansas branch office:
If incorporated, State of original incorporation:	Date:
Please contact the Arkansas Secretary of State at (501)682-3409 for in	nformation regarding filing requirements.

Complete items a, b, c, and d if filing as a foreign (out-of-state) corporation.

a. Date of certification with Arkansas Sec. of State:

d. Address of service agent:______

1.

2.

3.

4.

j.	Board of Directors (List all):							
	Name of each Director	Title		Address	PE and/or PS Reg. No.	State		
						- -		
	If firm or corporation, list below all officers:							
	Name of each officer	Title		Address	PE and/or PS Reg. No.	State		
	by the firm or corporation as a P. considers a Principal Engineer a	rincipal Enginee nd/or Surveyor a ant technical an	r and/or is the se	r Surveyor actin nior technical p	nd/or Professional Surveyor who has l g on behalf of the firm or corporation person who is a registered Professional ents on behalf of the firm which would	. The Board Engineer and/o		
	If partnership, list below all partners:							
	Name of each Partner	Title		Address	PE and/or PS Reg. No.	State		
	List all employees who are currently registered and in good standing as Professional Engineers and/or Professional Surveyor in the State of Arkansas and who shall be in responsible charge of the practice of engineering in this State by said corporation, partnership or firm. Name of each Arkansas PE and/or PS Title Address Arkansas PE and/or PS No. Expires							
-	As the Arkansas Professional Engineer and/or Professional Surveyor acting on behalf of the firm, corporation, or partnership, I certify by my signature, that the information contained in 8 above is correct (Note – this application cannot be processed until the AR PE and/or PS signing this document is registered or has renewed for the year for which this certificate shall apply).							
	Signature of Arkansas Profe and/or Professional Surveyo		er	AR	PE and/or PS Reg. No.			
0.	I, as an Officer and/or Partner certify by my signature, that the information contained in this form is correct.							
	Signature of Partner and/or Prin	ncipal		_				